# Facts About...



## **HIV/AIDS** in Injection Drug Users<sup>1</sup>

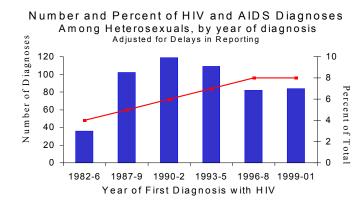
**SUMMARY:** Like other cities in the western US, the number of cases of HIV and AIDS among drug injectors is far lower than among gay and bisexual men. However, the percent of AIDS cases attributable to injection drug use (IDU) has increased from 4% in 1984-86 to 8% in 1999-2001. Drug injection is a more common route of HIV transmission for women compared to men and for people of color compared to whites.

### **BACKGROUND AND POPULATION SIZES:**

- There are an estimated 150,000 people in King County at increased risk of HIV infection because of illicit drug use or alcohol abuse. About 15,000 of these are at increased risk due to drug injection.
- Based on estimates from reported cases, up to 620 HIV-infected heterosexual IDU reside in King County.
- The estimated number of men who currently have sex with men and who also currently inject drugs is 600 to 900 (midpoint = 750). Most of these men are thought to have acquired HIV through sexual transmission rather than by sharing of injection equipment.
- The information in this fact sheet focuses on heterosexuals whose primary HIV risk is injection drug use. The separate fact sheets on men who have sex with men (MSM) also addresses MSM who inject drugs.

## STATUS AND TRENDS IN HIV/AIDS CASES:

- The first AIDS cases among King County IDU males and females were reported in 1986. Among the 4,963 King County residents reported living with HIV or AIDS June 30, 2002, 341 or 7% were IDU.
- The proportion of HIV/AIDS cases attributed to IDU among heterosexuals has increased from about 3% of cases in 1982-83 to 6% in 1990-92, 8% in 1996-98 and 1999-01 (see figure below).



- Nationally, IDU make up 25% of all AIDS cases, or about four times that in King County (6%). The proportion of IDU cases in WA outside of King County (15%) is 2½ times that in King County.
- While the number of male IDUs reported living in King County HIV/AIDS (230) is higher than female IDUs (111), the proportion of male cases whose infection was attributed to IDU is 5% vs. 24% of females.

<sup>1</sup> Includes injection drug users who did not have male-male sexual contact



■ Injection drug use is a relatively more common route of HIV transmission for King County African Americans with HIV/AIDS (15% of living cases), Hispanics (10%), and Native Americans (26%), compared to Whites or Asian/Pacific Islanders (4% each).

#### **HIV PREVALANCE AND INCIDENCE:**

- There are about 620 HIV infections among the estimated 15,000 IDU residing in King County, so about 4% of all IDU are infected.
- In unlinked (anonymous) surveys conducted by Public Health-Seattle & King County, 1.5% of over 7,000 IDU entering King County drug treatment programs from 1988-99 tested HIV positive.
- HIV prevalence among clients entering drug treatment has hovered around 2% and did not change significantly over the 12 years that these unlinked HIV surveys were conducted in King County.
- IDU in treatment (such as those tested in the unlinked surveys) tend to be at lower risk of HIV then other injectors. In one study, HIV prevalence among IDUs recruited at King County jail and at needle exchange sites was more than twice as high as IDUs in treatment.
- Evidence of the instability of HIV prevalence in IDUs appeared in nearby Vancouver BC (Canada) in 1994 when an outbreak of HIV began. During the 1994-1997 period, the HIV prevalence in IDUs there rose from 3% to 23%, with a high annual incidence rate of 18 new infections per 100 IDUs.

## **BEHAVIORAL RISKS AMONG IDUS ARRESTED IN KING COUNTY:**

- Public Health-Seattle & King County conducts an HIV and risk behavior survey of IDUs arrested and booked into the King County Correctional Facilities in Seattle and Kent. Between 8/98 and 7/02, 1,822 persons (76% men and 24% women) participated in the survey.
  - ✓ 38 (2%) were HIV positive with 22 (58%) of the 38 aware of their positive HIV status.
  - √ 87% reported a prior HIV test.
  - ✓ The median age when study participants began drug injection was 19 years.
  - ✓ In the past 6 months, 61% had injected with a needle that had been used by somebody else.
  - ✓ In the past 6 months, 72% had shared cookers and 61% had backloaded (i.e., divided up drugs with somebody else using the same needle).

#### **OTHER MEASURES OF RISK:**

- Although HIV prevalence is relatively low in King County IDU, a high proportion have evidence of previous exposure to other blood-borne viruses. These include antibody to hepatitis C virus (present in more than 80%), antibody to hepatitis B virus (present in almost 70%), and antibody to Human T-cell Lymphotropic Virus II (present in 10% or more). [Note that hepatitis B and C are more easily transmitted than HIV.]
- There is also evidence that transmission of other blood-borne viruses in local IDU does occur as a result of behaviors that can transmit HIV. In a follow-up study of Seattle-area IDU who had no serologic markers of previous exposure, 20% acquired hepatitis C and 10% acquired hepatitis B virus infection over a one-year period. These incidence rates suggest that risk behaviors persist and there is a potential for future spread of HIV among IDU. In the same study, HIV incidence in IDUs was less than 0.5% per year.